

1 A RESOLUTION encouraging the Legislative Research Commission to establish
2 the Kentucky Emergency Preparedness Task Force.

3 WHEREAS, since 2008, the Kentucky Department for Public Health has activated
4 the State Health Operations center 125 times to coordinate public health and medical
5 support for catastrophic and historical events including the 2009-2010 H1N1 influenza
6 outbreaks, the 2012 Ohio Valley tornado, the 2014-2015 Ebola virus disease event, the
7 2016 Zika virus disease event, the 2017-2019 Hepatitis A outbreak, and the COVID-19
8 virus outbreak; and

9 WHEREAS, due to its geology and geographical setting, Kentucky is vulnerable to
10 a wide array of natural and manmade hazards, and from 2000 to 2019, Kentucky received
11 32 major disaster declarations, 2 fire management assistance declarations, and 2
12 emergency declarations as well as emergency declarations for the COVID-19 virus
13 outbreak; and

14 WHEREAS, as the lead agency for emergency support, the Department for Public
15 Health's preparedness program, including all branch and field personnel, is 100 percent
16 federally funded; and

17 WHEREAS, Kentucky's public health and medical preparedness infrastructure faces
18 new and continuing challenges, including the high drug overdose death rate, emerging
19 disease threats such as COVID-19, increased federal work plan and reporting
20 requirements; and a high population of persons at risk because of diseases, disabilities,
21 and low-income; and

22 WHEREAS, the COVID-19 virus outbreak has created a public health crisis that
23 has had an impact on all aspects of society, including the health care system, the
24 economy, educational institutions, family relationships, social activities, and religious
25 practices; and

26 WHEREAS, the COVID-19 virus outbreak has revealed weaknesses in Kentucky's
27 preparedness for emergencies such as shortages of medical supplies, including medical

1 equipment, diagnostic testing, and treatment availability; a limited pool of medical
2 volunteers; limited state laboratory capacity; insufficient epidemiological capacity locally
3 and at the state health department; a declining number of public health personnel; and an
4 electronic medical data infrastructure that is not integrated; and

5 WHEREAS, the COVID-19 virus outbreak has resulted in the closing or
6 downsizing of small and large businesses putting thousands of Kentuckians out of work
7 and creating an economic crisis for the state; and

8 WHEREAS, the COVID-19 virus outbreak has resulted in limited access to public
9 and private institutions such as schools, state and local government offices, banks,
10 religious institutions, and postal services; and

11 WHEREAS, the short- and long-term impacts of the COVID-19 virus outbreak on
12 the mental health and well-being of Kentuckians is likely to be severe; and

13 WHEREAS, the Kentucky General Assembly, state and local government agencies,
14 private businesses, health care providers, educational institutions, religious organizations,
15 and thousands of individual Kentuckians and their families have sacrificed personally and
16 have risen to the challenge of addressing the needs of others during the COVID-19 virus
17 outbreak, more could be done in advance of the next emergency to increase the efficacy
18 of these actions; and

19 WHEREAS, taking action now to have a preparedness plan in place that strengthens
20 health care-related capabilities and emergency public health strategies can help Kentucky
21 be better prepared for the next public health crisis and better protect the health and
22 welfare of the citizens of Kentucky;

23 NOW, THEREFORE,

24 ***Be it resolved by the House of Representatives of the General Assembly of the***
25 ***Commonwealth of Kentucky:***

26 ➔Section 1. The Legislative Research Commission is encouraged to establish the
27 Kentucky Emergency Preparedness Task Force to assess Kentucky's preparedness for

1 statewide emergencies and to establish a plan of action for addressing components of
2 preparedness that need improvement to ensure that Kentucky is effectively equipped to
3 deal with emerging health threats and natural disasters.

4 ➔Section 2. The duties of the task force shall include but are not limited to:

- 5 (1) Hearing testimony from businesses, hospitals and health care providers,
6 medical supply companies, medical laboratories and diagnostic facilities, and agriculture
7 and farming enterprises to gain insight on the effects and challenges they face in a
8 statewide emergency;
- 9 (2) Assessing plans and needs for different types of emergencies;
- 10 (3) Evaluating the role and effectiveness of executive orders in emergency
11 situations;
- 12 (4) Evaluating and planning for state and local government agencies' responses
13 and coordination;
- 14 (5) Considering how to support and use research on effective emergency
15 responses;
- 16 (6) Assessing the needs of the statewide infection, disease, and immunity tracking
17 system;
- 18 (7) Examining the funding needs of different state, local, and private entities to
19 respond effectively in emergencies; and
- 20 (8) Exploring ways to strengthen and support lines of communication and the use
21 of technology during emergencies.

22 ➔Section 3. The Kentucky Emergency Preparedness Task Force shall be
23 composed of the following members with final membership of the task force being
24 subject to the consideration and approval of the Legislative Research Commission:

- 25 (1) Two members of the House of Representatives appointed by the Speaker of
26 the House of Representatives, one of whom shall be designated by the Speaker of the
27 House of Representatives as a co-chair of the task force;

1 (2) One member of the House of Representatives appointed by the Minority Floor
2 Leader of the House of Representatives;

3 (3) Two members of the Senate appointed by the President of the Senate, one of
4 whom shall be designated by the President of the Senate as a co-chair of the task force;

5 (4) One member of the Senate appointed by the Minority Floor Leader of the
6 Senate;

7 (5) The secretary of the Cabinet for Health and Family Services or designee;

8 (6) The commissioner of the Department for Public Health or designee;

9 (7) The secretary of the Education and Workforce Development Cabinet or
10 designee; and

11 (8) Any other members deemed appropriate by the Legislative Research
12 Commission including other members of the General Assembly and executive branch
13 officials.

14 ➔Section 4. The task force shall meet monthly during the 2020 Interim of the
15 General Assembly. The task force shall submit any findings and recommendations to the
16 Legislative Research Commission for referral to the appropriate committee or committees
17 by December 1, 2020.

18 ➔Section 5. Provisions of this Resolution to the contrary notwithstanding,
19 Legislative Research Commission shall have the authority to alternatively assign the
20 issues identified herein to an interim joint committee or subcommittee thereof, and to
21 designate a study completion date.